



# Town of Lunenburg

Board of Assessors  
PO Box 135  
Lunenburg, MA 01462  
(978)-582-4145

Dear Owner(s):

The Board of Assessors is continually striving for valuation accuracy. In order to establish proper values it is necessary for us to collect information on your recent property purchase. Please verify, correct or provide the information listed below and return this form to the Assessor's Office. Some changes may require an assessor to come out for verification. Thank you for your assistance.

Property Location:

Sellers:

Sale Date:

Sale Price:

1. At the time of conveyance did any of the following apply?

- |   |  |
|---|--|
| <input type="checkbox"/> Property was purchased/acquired from a relative                | <input type="checkbox"/> Property was purchased/acquired from a friend/neighbor    |
| <input type="checkbox"/> Purchase included a trade of property and/or cash              | <input type="checkbox"/> Seller helped finance purchase of property                |
| <input type="checkbox"/> Purchase was for a partial interest, or for several properties | <input type="checkbox"/> Property purchased from bank or at auction as foreclosure |
| <input type="checkbox"/> Property was being sold as a short sale                        | <input type="checkbox"/> At time of closing was monies were credited to buyer      |

Amount? \_\_\_\_\_

Other unusual circumstances behind sale? \_\_\_\_\_

2. Was the property listed with a real estate broker? \_\_\_\_\_ Which Firm? \_\_\_\_\_

3. Property Information: Please indicate the quantity of rooms per floor.

\*A full bath is any bath with shower/tub; Bedrooms must have a closet and the intended use was as a bedroom

	Kitchen	Living	Bedroom	Bath	1/2 Bath	Den/Study	Office	Family Rm	Other(specify)	No. of Fireplaces
1st Floor										
2nd Floor										
3rd Floor										
Basement										

4. Please indicate the overall condition of house and repairs if needed: \_\_\_\_\_

**On the back of this form please indicate owner's name & mailing address where future tax bills are to be sent:**

**(Sorry, bills cannot be mailed to your mortgage institution.)**

Name \_\_\_\_\_

Address \_\_\_\_\_

City or Town \_\_\_\_\_

State

Zip Code

Country (if not USA)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_